

HUMAN SERVICES DEPARTMENT[441]

Adopted and Filed

Pursuant to the authority of Iowa Code section 249A.4, the Department of Human Services amends Chapter 77, “Conditions of Participation for Providers of Medical and Remedial Care,” and Chapter 80, “Procedure and Method of Payment,” Iowa Administrative Code.

The Medicaid program’s provider participation requirements for psychologists currently refer to “the standards of the National Register of Health Service Providers in Psychology, 1981 edition.” The National Register of Health Service Providers in Psychology is now the National Register of Health Service Psychologists. The Register has credentialing requirements but no longer publishes dated editions of standards. These amendments update rule 441—77.22(249A) to reflect the current credentialing requirements of the National Register of Health Service Psychologists.

The Centers for Medicare and Medicaid Services (CMS) claim form requirements for payment of some Medicaid program services currently refer to “Form UB-92.” This form is outdated. These amendments also update paragraph 80.2(2)“a” to reflect the current UB-04 CMS claim form.

The option to copy rather than purchase CMS claim forms for Medicaid billing purposes is also eliminated.

Notice of Intended Action was published in the Iowa Administrative Bulletin as **ARC 2061C** on July 22, 2015. The Department received comments from two respondents during the comment period. The respondents’ comments and Department responses are as follows:

Respondent 1 Comment: In the Notice of Intended Action, the National Register of Health Service Psychologists and current credentialing requirements for Medicaid provider eligibility are highlighted. The commenter requested clarification regarding whether a licensed psychologist is required to be a listed member on the National Register of Health Service Psychologists registry or if meeting the credentialing requirements outlined by the Register without being listed on the registry is acceptable to attain Medicaid eligibility.

Department Response: If the licensed psychologist is listed on the registry of individuals certified by the National Register of Health Service Psychologists, the psychologist does not need to submit supporting documents. Medicaid enrollment staff verifies registration on the National Register of Health Service Psychologists registry Web site: <http://www.findapsychologist.org/>.

If the licensed psychologist is not listed on the registry of individuals certified by the National Register of Health Service Psychologists, submission of one of the following documents is required in order to meet credentialing requirements:

1. Doctoral level psychologists are considered to meet the National Register of Health Service Psychologist standards. A copy of the diploma is acceptable.
2. Iowa Health Service certification requirements are the same as the National Register of Health Service Psychologists certification requirements. A copy of the Iowa Health Service certification document is acceptable.
3. A written statement explaining how the licensed psychologist meets credentialing qualifications through health care service experience. The statement must include the psychologist’s name, national provider identification (NPI), date, and signature and be submitted on office letterhead to be acceptable.

The Department did not change the proposed amendment to address the respondent’s comment. There is no requirement outlined in this proposed amendment related to being listed on the registry of individuals certified by the National Register of Health Service Psychologists.

Respondent 2 Comment: The respondent expressed concern about the provision under the proposed amendment to 441—77.22(249A) regarding credentialing psychologists by current National Register of Health Service Psychologists credentialing requirements. The respondent’s fear is that this provision will disqualify several Iowa-licensed, masters-level psychologists from being reimbursed by Medicaid.

The respondent provided a history of formal allowances for both masters- and doctoral-level clinical psychologists. In the 1970s and 1980s, the profession led a movement to require clinical psychologists

to have a doctoral degree. Recognizing that there were still some qualified (and licensed) masters-level psychologists, both the Iowa Board of Psychology and the national credentialing associations permitted masters-level clinical psychologists to apply to be grandfathered in. In about 1985, the State of Iowa told masters-level psychologists they could still become licensed if they applied for licensure, demonstrated their experience, took the tests, and passed the oral examinations. The respondent believed that the National Register was also following a similar process in the late 1970s.

The respondent noted that now all (new) applicants would need to be doctoral degree applicants. The respondent noted that there are still several licensed or credentialed masters-level psychologists practicing and that the psychologists would have been practicing as such for the past 30-plus years.

The respondent noted that his organization has an Iowa licensed masters-level psychologist who met the grandfathered criteria to be on the National Register and in 1985 applied for and subsequently received his Iowa licensure. That masters-level psychologist was also duly credentialed by Medicaid and provided assessments for children for years since and continues to do so through the respondent's organization. The respondent is concerned that the proposed change would disqualify this masters-level psychologist and therefore would affect the children served by his organization. The respondent also noted that it is very difficult to recruit psychologists, stating that the last time his organization undertook such recruitment, it took 18 months to find a qualified applicant.

Department Response: The Department will not disqualify currently licensed masters-level psychologists licensed by the Iowa Board of Psychology from being reimbursed by Medicaid.

In reviewing current and historical versions of the Iowa Code and Iowa Administrative Code provisions under the Department's purview, no provisions are found which specifically address the "grandfathering" of masters-level psychologists for the purposes of enrolling as providers under Iowa Medicaid. The Department has consistently followed the guidance of the Board of Psychology and other national organizations on the "grandfathering" of masters-level psychologists. Iowa Code section 154B.6 addresses "requirements for licensure" for psychologists. This Iowa Code section was originally effective July 1, 1985, and does allow for "grandfathering" of masters-level psychologists. Specifically, Iowa Code section 154B.6(1) states: "Except as provided in this section, after July 1, 1985, a new applicant for licensure as a psychologist shall possess a doctoral degree in psychology from an institution approved by the board..." (emphasis added). The Iowa Code section implies an allowance for masters-level licensure for a psychologist prior to July 1, 1985, as long as the person possesses at least a masters-level degree from an institution approved by the board.

With respect to the respondent's concerns regarding masters-level psychologists and the technical corrections being made to 441—77.22(249A), it must be noted that even before the changes were proposed in **ARC 2061C**, the same concerns would have been present regarding the standards under the existing rule. The standard under the current rule language (i.e., "meeting the standards of the National Register of Health Service Providers in Psychology, 1981 edition, published by the council for the National Register of Health Service Providers in Psychology") requires psychologists to be at the doctoral level. The Department understands that both the existing rule and the proposed amendment only apply to new applicants for licensure, not to those currently licensed, including those masters-level psychologists "grandfathered" prior to July 1, 1985. The Department did not make any additional changes to the proposed amendment as the result of the respondent's comments.

These amendments are identical to those published under Notice of Intended Action.

The Council on Human Services adopted these amendments on September 9, 2015.

These amendments do not provide for waivers in specified situations because requests for the waiver of any rule may be submitted under the Department's general rule on exceptions at 441—1.8(17A,217).

After analysis and review of this rule making, no impact on jobs has been found.

These amendments are intended to implement Iowa Code section 249A.4.

These amendments will become effective December 1, 2015.

The following amendments are adopted.

ITEM 1. Amend rule 441—77.22(249A) as follows:

441—77.22(249A) Psychologists. All psychologists licensed to practice in the state of Iowa and meeting the ~~standards current credentialing requirements~~ of the National Register of Health Service ~~Providers in Psychology, 1981 edition, published by the council for the National Register of Health Service Providers in Psychology;~~ Psychologists are eligible to participate in the medical assistance program. Psychologists in other states are eligible to participate when they are duly licensed to practice in that state and meet the ~~standards current credentialing requirements~~ of the National Register of Health Service ~~Providers in Psychology~~ Psychologists.

This rule is intended to implement Iowa Code sections 249A.4 and 249A.15.

ITEM 2. Amend paragraph **80.2(2)“a”** as follows:

a. The following providers shall submit claims on Form ~~UB-92~~ UB-04, CMS-1450:

(1) to (9) No change.

ITEM 3. Amend subrule 80.2(3) as follows:

80.2(3) Providers shall purchase ~~or copy~~ their supplies of forms CMS-1450 and CMS-1500 for use in billing.

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EDITOR’S NOTE: For replacement pages for IAC, see IAC Supplement 9/30/15.